

BK0374PG0752

STATE MS.-DE SOTO CO.

S00-0100

KATHERINE HICKMAN AND HUSBAND,
THOMAS M. HICKMAN,
GRANTORS

JUN 20 3 13 PM '00

TO

BK 374 PG 0752
W.F. CLK.

WARRANTY

DEED

TED A. GREEN AND WIFE,
MARY GREEN

GRANTEES

FOR AND IN CONSIDERATION of the sum of Ten Dollars (\$10.00) cash in hand paid, and other good and valuable considerations, the receipt of all of which is hereby acknowledged, We, Katherine Hickman and husband, Thomas M. Hickman, do hereby sell, convey, and warrant unto, Ted A. Green and wife, Mary Green, as tenants by the entirety with full rights of survivorship and not as tenants in ^{common} the land lying and being situated in DeSoto County, Mississippi, described as follows, to-wit:

Lot 159, Section "G", Pinehurst Subdivision, located in Section 10, Township 2 South, Range 7 West, DeSoto County, Mississippi, as per plat thereof recorded in Plat Book 53, Page 35, in the office of the Chancery Clerk of DeSoto County, Mississippi.

The warranty in this deed is subject to rights of ways and easements for public roads and public utilities, to building, zoning, subdivision and health department regulations in effect in DeSoto County, Mississippi.

Subject to subdivision restrictive covenants, easements and setback lines as recorded in Book 53, Page 35 in the office of the Chancery Clerk of DeSoto County, Mississippi.

Taxes for have been prorated, and possession is given with this deed.

The effective date of this Warranty Deed is May 23, 2000.

WITNESS our signature(s), this the 19th day of February, 2000.

Katherine Hickman
KATHERINE HICKMAN
Thomas M. Hickman
THOMAS M. HICKMAN

STATE OF MISSISSIPPI:
COUNTY OF DESOTO:

PERSONALLY APPEARED before me, the undersigned authority at law, in and for the State and County aforesaid, the within named Katherine Hickman and husband, Thomas M. Hickman, who acknowledged that they signed and delivered the above and foregoing Deed on the day and year therein mentioned, as their free act and deed, and for the purposes therein expressed.

GIVEN UNDER MY HAND AND SEAL OF OFFICE, this the ____ day of _____, 2000.

My commission expires:

Notary Public

Grantors Address:

230 Goodman Rd #510
Southaven, MS 38671
Home Phone Number: 662-349-2234
Business Number: 662-349-2234

Grantees Address:

4853 Henry Drive
Olive Branch, MS 38654
Home Phone Number: 662-795-0469
Business Number: 901-395-8611

Prepared By:

Austin Law Firm, P.A.
230 Goodman
Suite 510
Southaven, Mississippi 38671
(601) 349-2234

Prepared By Return To:
SPARKMAN & SPARKMAN, P.C.
Attorneys at Law
Post Office Box 200
Southaven, MS 38671-0200
662-349-8900

This acknowledgment is only used if the owners will be signing separately. Refer to #5 on the previous page.

STATE OF MD
COUNTY OF Desoto) s.s.

On Feb. 19, 2000 before me, June Dye,
a Notary Public in and for said County and State, personally appeared
Thomas M. Hickman
personally known to me (or proved to me on the basis of satisfactory evidence) to be
the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged
to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by
his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which
the person(s) acted, executed the instrument.

WITNESS my hand and official seal

Signature

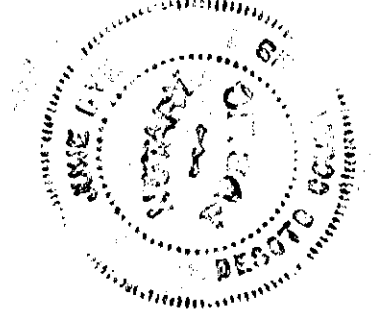
June Dye

(JUNE DYE)

My Commission expires:

2-22-2003

(This area for official notarial seal)



This acknowledgment is only used if the owners will be signing separately. Refer to #5 on the previous page.

STATE OF Nevada
COUNTY OF Carsen) s.s.

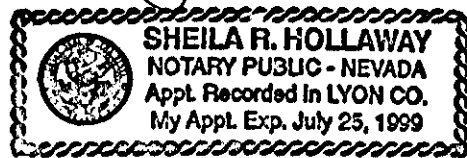
On 02-21-2000 before me, Sheila R Hollaway
a Notary Public in and for said County and State, personally appeared
Katherine Hickman Katharine Hickman
personally known to me (or proved to me on the basis of satisfactory evidence) to be
the person(s) whose name(s) is/are subscribed to the within instrument and acknowledged
to me that he/she/they executed the same in his/her/their authorized capacity(ies), and that by
his/her/their signature(s) on the instrument the person(s), or the entity upon behalf of which
the person(s) acted, executed the instrument.

WITNESS my hand and official seal

Signature

Sheila R Hollaway

My Commission expires:



(This area for official notarial seal)

Notary: Please
Fill out this
Form Completely.
Top & Bottom

REQUIRED NOTARY PUBLIC INFORMATION

(This is required to be completed on all transactions)

Business Address:

Seller!

Business Phone:

Name:

809 Piacere St.
Carsen City NV 89701
725) 841-8467
Sheila R Hollaway.
(Please print or type)